UNITED STATES DISTRICT COURT

DISTRICT OF OREGON

ESHA RESEARCH, LLC,			Case No.: 3:25-CV-	Case No.: _3:25-CV-00880-JR			
		Plaintiff(s),					
v.			MOTION FOR LEA PRO HAC VICE	MOTION FOR LEAVE TO APPEAR PRO HAC VICE			
RLH ASSETS,	LLC, dba	FOODWIT; DOES 1	-20				
		Defendant(s).					
Attorne	ey <u>Erika H</u>	ł. Warren	requests specia	al admission <i>p</i>	oro hac		
vice to the Bar	of the U	nited States Distric	ct Court for the District of Oreg	on in the abov	/e-		
captioned case	e for the p	urposes of represe	enting the following party (or pa	rties):			
Defendant RLH	H Assets, L	LC, dba Foodwit					
In supp	ort of thi	s application, I cer	rtify that: 1) I am an active mer	nber in good	standing		
• •) that I have read and am famili		· ·		
			Civil and Criminal Procedure, th				
	,	Statement of Profe	,		01 11110		
,			the Bar of the United States Di	strict Court fo	er tha		
		•					
	Ü		e of litigating in the above matt	er and will be	:		
terminated upo	on the cor	nclusion of the mat	tter.				
(1)	PERSO	ONAL DATA:					
	Name:	Warren, Erika H.					
		(Last Name)	(First Name)	(MI)	(Suffix)		
	Agency	//firm affiliation: \	Warren Kash Warren LLP				

Business e-mail address: erika@warrenkashwarren.com

Mailing address: 2261 Market Street, No. 606

City: San Francisco

Phone number: (415) 895-2940

U.S. District Court – Oregon [Rev. 11/2019]

Fax number: (415) 895-2964

State:CA

Zip: 94114

	(2)	BAR ADMISSION INFORMATION:					
		State bar admission(s), date(s) of admission, and bar number State Bar of California, 01/2014, #295570					
		(b)	Other federal court admission(s) and date(s) of admission: E.D. Tex. 2/2014; N.D. Cal. 11/2014; S.D. Cal. 12/2017; W.D. Tex. 12/2020; US Supreme Court 1/2023; C.D. Cal. 7/2023; Fed. Cir. 8/2024; D. Or. 4/2025				
	(3) CERTIFICATION OF DISCIPLINARY ACTIONS:						
	V		ot now, nor have I ever been, subject to any disciplinary action by any federal bar association or subject to judicial sanctions.				
		I am now or have been subject to disciplinary action by a state or federal bar association or subject to judicial sanctions. (Attach letter of explanation.)					
	(4)	CERTIFICATION OF PROFESSIONAL LIABILITY INSURANCE: Pursuant to LR 83-3, I have professional liability insurance, or financial responsibility equivalent to liability insurance, that meets the insurance requirements of the Oregon State Bar for attorneys practicing in this District, and that will apply and remain in force for the duration of the case, including any appeal proceedings.					
	(5)	CM/ECF REGISTRATION: I acknowledge that I will become a registered user of the Court's case management and electronic case filing system (CM/ECF) upon approval of this application, and I consent to electronic service pursuant to Fed. R. Civ. P. 5(b)(2)(E) and the Local Rules of the District of Oregon.					
			ey Seeking <i>Pro Hac Vice</i> Admission: I have read and understand the 3, and I certify that the above information is true and correct.				
Ι	DATED	<u>: 05/29/2</u>	025				
			/s/ Erika H. Warren (Signature)				

U.S. District Court – Oregon [Rev. 11/2019]

REQUIREMENT TO ASSOCIATE WITH LOCAL COUNSEL:

LR 83-3(a)(1) requires applicants for <i>pro hac vice</i> admission to associate with local counsel,
unless requesting a waiver of the requirement under LR 45-1.
To magnest a waiven of the magninement to associate with local council under LD 45.1, check

To request a waiver of the re following box:	quirement to ass	sociate with lo	cal counsel und	ler LR 45-1, o	check the		
I seek admission for to Court did not issue. I requirement to associ from local counsel with	Pursuant to LR 4 ate with local co	45-1(b), I requently the state of the state	est a waiver of	the LR 83-3(a)(1)		
To associate with local couns obtain the signature of local of	-	following info	rmation about l	ocal counsel,	and		
Name: McStay, P. Andrew Jr							
(Last N		(First Name)		(MI)	(Suffix)		
OSB number: <u>033997</u>		<u>-</u>					
Agency/firm affiliation: Davis Wright Tremaine LLP							
Mailing address: 560 SW 10th Avenue, Suite 700							
City: Portland		_State: OR	Zip:		97205		
Phone number: (503) 241-230	0	Fax number:	(503) 778-5299				
Business e-mail address: andymcstay@dwt.com							
CERTIFICATION OF ASS	SOCIATE LO	CAL COUNSI	EL:				
I certify that I am a member in good standing of the bar of this Court, that I have read and understand the requirements of LR 83-3, and that I will serve as designated local counsel in case number 3:25-CV-00880-JR							
DATED: 05/29/2025							
		/	20 m Hay &				
		(Signature of L	ocal Counsel)				